MAR 2 5 2008 THOMSON € FINANCIAL

Actual or Estimated Date of Incorporation or Organization:

FORM D

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D. SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

OMB APPROVAL								
OMB Num	ber:	3235-0076						
Expires:	IngA	30,2008 e burden						
Estimated	averac	e burden						
hours per r	espon	se 16.00						

SEC USE ONLY

DATE RECEIVED

Actual Estimated

UNIFORM LIMITED OFFERING EXEMPT	rion I I I
UNITORM LIMITED OFFERING EXEMPT	14140
Name of Offering (check if this is an amendment and name has changed, and indicate change.) \$1,500,000 Senior Secured Rural America Bond Series 2008	Wail Processing
Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506 Section 4(6) Type of Filing New Filing Amendment	J ULOE SECTION
	MAR 1 4 7000
A. BASIC IDENTIFICATION DATA	11/11/11/11/11/11
1. Enter the information requested about the assuer	· · · ·
Name of Issuer (check if this is an amendment and name has changed, and indicate change.)	Washington, DC
Cramer Creek, Inc.	101
Address of Executive Offices (Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
209 East Bridge Street Granbury, Texas 76048	
Address of Principal Business Operations (Number and Street, City, State, Zip Code) (if different from Executive Offices)	Telephone Number (Including Area Code)
Brief Description of Business	
health treatment facility	
Type of Business Organization	
Ø corporation ☐ limited partnership, already formed ☐ other (pleas	sc specify):
business trust limited partnership, to be formed	I LEBON BELBUIDH BEUL DOND HERBENDY BIREBE I
Moath Year	

08042343

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 1/5 C 77d(6)

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CN for Canada; FN for other foreign jurisdiction)

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State:

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predictated on the filling of a federal notice.

Г		- 	A. BASIC II	ENTIFICATION DATA		
2.	Each beneficial or Each executive of	the issuer, if the is wher having the por Micer and director of	isuer has been organized wer to vote or dispose, or d	within the past five years; lirect the vote or disposition f corporate general and ma		of a class of equity securities of the issu partnership issuers; and
Chec	ck Box(es) that Apply:	Promoter	☐ Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
	Name (Last name first, iam McKay	if endevidual)				
	ness or Residence Addr East Bridge Street		Street, City, State, Zip C s 76048	(ode)		
Chec	ck Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full	Name (Last name first,	if individual)	***************************************	- · · · · · · · · · · · · · · · · · · ·		
Busi	ness or Residence Addr	ess (Number and	Street, City, State, Zip C	ode)	· · · · · · · · · · · · · · · · · · ·	
Chec	k Box(es) that Apply	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full	Name (Last name first.	if individual)	···			
Busi	ness of Residence Addr	ess (Number and	Street, City, State, Zip C	ode)	<u>-</u>	
Chec	ik Box(es) that Apply:	Promotes	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full	Name (Last name first,	if individual)				
Dusn	ness or Residence Addre	ess (Number and	Street, City, State, Zip C	ode)	······································	
Chec	k Box(es) that Apply:	Promuter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full	Name (Last name first,	if individual)				
Busin	ness or Residence Addre	sss (Number and	Street, City, State, Zip C	ode)		
Chec	k Box(es) that Apply:	Promoter	Beneticial Owner	Executive Officer	Director	General and/or Managing Partner
Full 1	Name (Last name first,	if individual)				<u> </u>
Busin	ness or Residence Addre	ess (Number and	Street, City, State, Zip C	nde)		
Chec	k Box(es) that Apply.	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full I	Name (Last name first, i	f individual)		· · · · · · · · · · · · · · · · · · ·		
Busir	ness or Residence Addre	ss (Number and	Street, City, State, Zip C	ode)		
		(Use bla	nk sheet, or copy and use	additional copies of this s	heet, as necessary	

					NFORMAT	TON ABOU	T ACCED	NC.	···-··			
				D. 1	INFORMA I	ION ABOV) OFFER				Yes	No
i. Ilas t	he issuer sol	ld, or does	lhe issuer i	ntend to se	:11, to non-a	accredited	investors i	n this offer	ing?	*********		
	Answer also in Appendix, Column 2, if filling under ULOE.											
2. What	. What is the minimum investment that will be accepted from any individual?									s <u>10</u>	0,000.00	
	. Does the offering permit joint ownership of a single unit?									Yes	Νo	
	the informa											
lfa pe	erson to be li	sted is an as	sociated p	crson or ag	ent of a bro	ker or deal	er registere	d with the i	SEC and/or	with a state	c	
	tes, list the r ker or dealer								ociated per	sons of suc	h	
	(Last name							<u></u>				
	(4		,									
Business	or Residence	Address (Number an	d Street, C	ity, State, 2	Zip Code)						
Name of /	Associated B	roker or De	ealer									
	Which Perso										_	
(Che	k "All State	s" or check	individua	l States)	***************************************			********	***************		□ ^	II States
ĀL	AK	AZ	AR	CA	CO	CT	DE	(BC)	(FL)	GA	HI	(II)
	(KI)	IA	KS	(KY)	LA	ME	MD	MA	MI	MN	MS	MO
[MT]	NE	NV)	(NH)	Ŋ	MM	(NY)	NC	ND	OH	OK	OR	PA
RI	SC)	(SD)	[<u>N.].</u>	TEX	UT	[77]	(VA)	WA	WV	WI	WY	PR
Full Name	(Last name	first, if inc	lividual)		· · ·			····	<u> </u>			
Business	or Residenc	e Address (Number ar	d Street, C	ity, State,	Zip Code)						
		 -								<u></u>		
Name of	Associated B	raker of De	taler									
States in V	Which Perso	n Listed Ha	s Solicited	or Intend:	to Solicit	Purchasers						
	k "All State					-						ll States
	(AK)	(AZ)	AR		(CO)		(DE)	(DC)		IGA)		
II.	(NE)	NV	(KS)	(KY) (NJ)	LA.I NM	(ME)	MD	MA ND	(MI)	MN OK	MS OR	MQ
ET.	(SC)		(אבן) היייו	(TX)	(UT)		VA)	(₩A)	(₩V)	(Wi)	WY	(PA) (PR)
Full Name	(Last name	first, if ind	lividual)									
Business	or Residenc	e Address (Number an	d Street, C	ity, State,	Zip Code)	····					
Name of A	Associated B	roker or De	aler									
States in \	Vhich Perso	n Listed Ha	s Solicited	or Intends	to Solicit	Purchasers						
(Che	k "All State	s" or check	individual	States)			**************	***************************************		*********	□ ^I	l States
ΙΔL	(AK)	ΑZ	AR	(CA)	CO	CT	(DE)	(DC)	ŒL	GA)	HL	Œ
			KS	ĸŸ	(LA)	ME	MD	MA	M	MN	MS	MO
MT	NE	NV	NH	[N]	NM	NY	NC	(AD)	OH	OK	OR	(PA)
RI	SC	SD	TN	TX	$\mathbb{U}T$	$\nabla \mathbf{T}$	VA	WA	WV	W	WY	PR

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.		
	Type of Security	Aggregate Offering Price	Amount Already Sold
	Debi	1,500,000.00	\$ 1,500,000.00
	Equity		
	Common Preferred	· · · · · · · · · · · · · · · · · · ·	
	Convertible Securities (including warrants)	<u> </u>	s
	Partnership Interests	<u> </u>	\$
	Other (Specify)	· · · · · · · · · · · · · · · · · · ·	\$
	Total	1,500,000.00	\$ 1,500,000.00
	Answer also in Appendix, Column 3, if filing under ULOE.		
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."	Number Investors	Aggregate Driller Amount of Purchases
	Accredited Investors		\$ 1,500,000.00
	Non-accredited Investors		\$
	Total (for filings under Rule 504 only)		\$
	Answer also in Appendix, Column 4, if filing under ULOE.		
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1.		
	Type of Offering	Type of Security	Dollar Amount Sold
	Rule 305	-	•
	Regulation A		·
	Rule 504		\$
	Total		\$ 0.00
4	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the insurer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish un estimate and check the box to the left of the estimate.		
	Transfer Agent's Fees		s
	Printing and Engraving Costs	=	S
	Legal Fees	_	40 400 00
	Accounting Fees		_
	Engineering Fees	n	\$
	Sales Commissions (specify finders' fees separately)	_	s
	Other Expenses (identify)	_	5
	Total		13,400.00

	C. OFFERING PR	ICE, NUMBER OF INVESTORS, EXPENSES AND USE	OF PROCEEDS	
	and total expenses furnished in response to	regate offering price given in response to Part C — Question Part C — Question 4.a. This difference is the "adjusted g	ross	\$
5.	each of the purposes shown. If the amo	d gross proceed to the issuer used or proposed to be used bunt for any purpose is not known, furnish an estimate The total of the payments listed must equal the adjusted g use to Part C Question 4.b above.	and	
			Payments to Officers, Directors, & Affiliates	
	Purchase of real estate		🗆 S	_ 🗆 🗆
	Purchase, rental or leasing and installat	ion of machinery		
		gs and facilities		
	Acquisition of other businesses (include offering that may be used in exchange f	ing the value of securities involved in this		
	_		_	
			_	
	Other (speerly).		LJ *	_ 🗠 🏎
			 □\$	🗆 \$
	Column Totals		<u>\$</u> 0.00	
	Total Payments Listed (column totals ac	ided)	🗀 \$_	1,486,600.00
		D. FEDERAL SIGNATURE		7
sign	ature constitutes an undertaking by the is	ned by the undersigned duly authorized person. If this n suer to furnish to the U.S. Securities and Exchange Con y non-accredited investor pursuant to paragraph (bX2)	ımission, upon writ	
Issu	er (Print or Type)	Signature	Date	
C	ramer Creek, Inc.	I a di gi forfar	effective Ja	muary 22, 2008
	ne of Signer (Print or Type)	Title of Signer (Print or Type)		
	illiam McKay	President		

	e. State signature								
I.	Is any party described in 17 CFR 230.262 presently subject to any of the disqualification provisions of such rule?	Yes D	No ⊠						
	See Appendix, Column 5, for state response.								

- The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed a notice on Form D (17 CFR 239.500) at such times as required by state law.
- The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees.
- 4. The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform limited Offering Exemption (UI.OE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied.

The issuer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by the undersigned duly authorized person.

	/_	·
Issuer (Print or Type)	Signature	Date
Cramer Creek, Inc.	1 mys	effective January 22, 2008
Name (Print or Type)	Title (Print or Type)	
William McKay	President	

Instruction.

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

				AF	PENDIX				
Į	Intend to non-a investor	1 to sell accredited is in State I-Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)		amount pu	f investor and rehased in State C-Item 2)		5 Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)	
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
AL								1	
AK									
AZ									
AR							•		
CA									:
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				APP	ENDIX				
1	Intend to non-a investor	2 if to sell accredited is in State	3 Type of security and aggregate offering price offered in state (Part C-Item 1)		Type of investor and amount purchased in State (Part C-Item 2)				
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
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МТ									
NE					<u> </u>				
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				APP	ENDIX				
l	Intend to sell to non-accredited investors in State (Part B-Item 1)		accredited offering price offered in state		Type of investor and amount purchased in State (Part C-Item 2)			under Si (if yes explan waiver	diffication ate ULOE, attach attion of granted)
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
WY					İ	İ			
PR									